

South Dakota Board of Nursing

South Dakota Department of Health
722 Main Street, Suite 3; Spearfish, SD 57783
(605) 642-1388; Fax: (605) 642-1389; www.state.sd.us/doh/nursing

Application for Curriculum Changes to a Currently Approved Training Program

Approved programs must submit, within 30 days after a change, any substantive changes made to the program during their 2-year approval period. Written approval or denial of a requested change will be issued within 90 days after receipt of the application. Send completed application and supporting documentation to:

South Dakota Board of Nursing

722 Main Street, Suite 3 Spearfish, SD 57783

| Name of Institution: Santord Chamberlain Care Center (Mid-Dakota) |
|---|
| Address: (3000 Bliron Blvd |
| Chamberthin SD57325 |
| Phone Number: 1005 - 234 - 6618 Fax Number: 1005 - 234 - 6832 |
| E-mall Addresses of Primary Coordinator and/or Instructor: Angelia Frederick @ Santordheath . Org |
| |

List Personnel and Licensure Information:

Program Coordinator must be a registered nurse with 2 years nursing experience, at least one of which is in the provision of long-term care services. The Director of Nursing (DON) may serve simultaneously as the program coordinator but may not perform training while serving as DON. (ARSD 44:04:18:10)

| The state of the s | |
|--|--|
| The state of the s | |
| the second of th | |
| I Name of Dearstern Committee | |
| and the continuous and the conti | The state of the s |
| Control of the contro | |
| and the same of th | |
| and the same of th | |
| The same of the sa | Date: Translated by COROM |
| | |
| 1/00-1. | |
| WALL O Frederial | CT III/N//U/ III/ III/ II/ II/ II/ II/ II/ II/ I |
| 111401401100 | |
| | |
| of baguaghing nous Duran 6 11 : | |
| □ VLICOURSTING NEW Program Coordinators | attach curriculum vita non-man an |

It requesting new Program Coordinator attach curriculum vita, resume, or work history

<u>Primary Instructor</u> must be a licensed nurse (RN or LPN) with 2 years nursing experience, at least one of which is in the provision of long-term care services. The primary instructor is the actual teacher of course material. (ARSD 44:04:18:11)

| | RN | OR LPN TGENSE |
|-----------------------------------|------------|-------------------------|
| EVENUE OF STILLED STILLED STILLED | | Septration Verification |
| lackie Waldner | SO ROJUNTS | 2-11-13 |

If requesting new Primary Instructor attach curriculum vita, resume, or work history, and attach documentation supporting previous experience in teaching adults within the past five years or documentation of completing a course in the instruction of adults.

<u>Supplemental Personnel</u> may assist with instruction, they must have one year of experience in their respective field of practice, i.e. additional licensed nurses, social worker, physical therapist. (ARSD 44:04:18:12) *If requesting new Supplemental Personnel* attach curriculum vita, resume, or work history.

| | | TOENSURE! | संस्तान्त्रकारमञ्जू | Name of the last o |
|--------------------------------------|--|-----------|--------------------------------------|--|
| Supplemental Personnel & Gredentials | in my to prompt all my vertices said the | Number | Expiration | Ventication |
| | The second secon | | Erd _i gi - ^17**** | |
| Misty Thompson | SD- PN | RO24421 | 5/28/14 | |
| Larol) Lake | 50-RN | 2024829 | 12/13/13 | |
| Mardi Swanson | SD-RN | RD 35434 | 8/25/13 | |
| | | | | |

> YOU'L holisted

.

M. E.

Mit.



South Dakota Board of Nursing South Dakota Department of Health

South Dakota Department of Health
722 Main Street, Suite 3; Spearfish, SD 57783
(605) 642-1388; Fax: (605) 642-1389; www.state.sd.us/doh/nursing

| ubmit Documentation to Support Requested Curriculum Changes: | | | | | | |
|--|-----|--|--|--|--|--|
| ame of Course (if applicable): [MA Training Drogram AHCA = 11)e Care Online (curt | end | | | | | |
| variety of teaching methods may be utilized in achieving the classroom instruction such as independent study, video struction, and online instruction. Submit reference list of teaching materials utilized (include name of book or resource, publisher, publication date, etc.) | 100 | | | | | |
| Behaviorally stated objectives with measurable performance criteria for each unit of curriculum Curriculum, objectives and agenda documenting the requirements for the minimum 75 hour course as follows: A minimum of 16 hours of instruction prior to student having direct patient contact; the 16 hours must include: Communication and interpersonal skills, infection control, safety/emergency procedures, promoting residents' independence, respecting residents' rights. A minimum of 16 hours of supervised practical instruction with enough instructors to ensure safe and effective care; the instructor ratio may not exceed eight students for one instructor. Instruction in each of the following content areas (see ARSD 44:04:18:15 for more detail): Basic nursing skills (including documentation) including: vital signs; height and weight; client environmen needs; recognizing abnormal changes in body functioning and the importance of reporting such changes to a supervisor; and caring for dying clients; Personal care skills, including: bathing; grooming, including mouth care; dressing; toileting; assisting wite eating and hydration; feeding techniques; skin care; and transfers, positioning, and turning; Mental health and social services, including: responding appropriately to behaviors; awareness of developmental tasks associated with aging process; respecting personal choices and preserving client dignity, and recognizing sources of emotional support; Care of cognitively impaired clients, including: communication and techniques for addressing unique needs and behaviors; Basic restorative nursing services, including: self-care; use of assistive devices in transferring; ambulation eating, and dressing; range of motion; turning and positioning in bed and chair; bowel and bladder care and training; and care and use of prosthetic and orthotic devices; Residents' rights, including: privacy and confidentiality; self-determination; reporting grievances and disputes; participating in groups and activities; security of persona | | | | | | |
| ngram Coordinator Signature: 11 11 11 11 11 11 11 11 11 11 11 11 11 | | | | | | |
| nis section to be completed by the South Dakota Board of Nursing | | | | | | |
| ate Application Received: 22712 Date Application Denied: | | | | | | |
| pate Approved: 12 27 12 Reason for Denial: Approved: Dec. 20M | | | | | | |
| pard Representative: 50 m/v ate Notice Sent to Institution: 1212712 | - | | | | | |
| rate notice Schi to Institution: L L L L L L L L | | | | | | |

October 20, 2011

2

Mr.